



Application No. (if known): 09/852,225

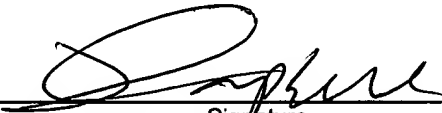
Attorney Docket No.: 09450/000K678-US0

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1. Amendment in Response to Final Office Action (12 pages);
2. Amendment Transmittal (1 page);
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| | | | |
|---|----|------------------------|---------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 09/852,225 |
| | | Filing Date | May 9, 2001 |
| | | First Named Inventor | Mitsuru Akaike |
| | | Art Unit | 3632 |
| | | Examiner Name | Morrison Naschica Sanders |
| Total Number of Pages in This Submission | 15 | Attorney Docket Number | 09450/000K678-US0 |

ENCLOSURES (Check all that apply)

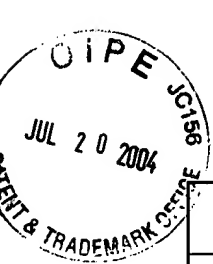
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|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Amendment Transmittal (1 pg.); 2. Certificate of Express Mailing (1 pg.); and 3. Return Postcard |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|--|
| Firm or Individual name | DARBY & DARBY P.C. Louis J. DelJuidice - 47,522 |
| Signature | |
| Date | July 20, 2004 |

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| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 09450/000K678-US0 | |
|--|---|---|-----------------------------------|---------------------------------|------|
| Application No. 09/852,225 | Filing Date May 9, 2001 | Examiner Morrison Naschica Sanders | Art Unit 3632 | | |
| Applicant(s): Mitsuru Akaike | | | | | |
| Invention: STOPPER DEVICE AND TELESCOPIC UNIT | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 11 | - 20 = | | x | 0.00 |
| Independent Claims | 3 | - 3 = | | x | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
| Louis J. DelJuidice Attorney Reg. No.: 47,522 | | | | Dated: <u>July 20, 2004</u> | |
| DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7783 | | | | | |

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JUL 20 2004
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**In re Patent Application of:
Mitsuru Akaike**

Art Unit: 3632

Examiner: Naschica S. Morrison

For: STOPPER DEVICE AND TELESCOPIC UNIT

AMENDMENT AFTER FINAL ACTION (37 C.F.R. SECTION 1.116)

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated May 20, 2004, finally rejecting claims 1-12. please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.